## FORMAL CONSUMER COMPLAINT

to

Department of Housing, Buildings & Construction Division of Plumbing 500 Mero St, 1st Floor Frankfort, KY 40601-1987

Phone #: 502-573-0397 Fax #: 502-573-1058

| Site of Complaint                                   |                           |                     |               |  |
|---|---------------------------|---------------------|---------------|--|
| County  | City                      | Street or Road      |               |  |
| Owner(s) Name                                       | Home Phone #              |                     |               |  |
| Address   |                           |                     |               |  |
| Street or P O Box Address                           | City                      | County              | Zip           |  |
| Company Name  |                           |                     |               |  |
| Company Owner(s) Name                               | Ma                        | Master License #    |               |  |
| Address   |                           |                     |               |  |
| Street or P O Box Address                           | City                      | County              | Zip           |  |
| Company Phone #                                     | Date of Installation      |                     |               |  |
| Check all that applies below. Plumber not_licensed. |                           |                     |               |  |
| Incompetence of or deliberate disrega               | rd and violation of build | ding codes and appl | icable codes. |  |
| Faulty installation, maintenance, alter             | ation or repair of:       |                     |               |  |
| Other   |                           |                     |               |  |
| There is currently on-going court lit               | igation in this matter i  | n                   | County        |  |
| Owner(s) Signature                                  |                           | Date                |               |  |

## PLUMBING VIOLATION OR DEFICIENCY (ADDITIONAL PAGES MAY BE USED IF NEEDED)

| Explain in detail starting with the date problems was first discovered with the Plumbing |
|--|
| System:  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| **Your view as to how this matter should be resolved**                                   |
|  |
|  |
|  |
|  |
|  |
|  |